

**Political Organization
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

A For the period beginning 01/01/2013 **and ending** 06/30/2013

B Check applicable box: ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

1 Name of organization Plumbers Local 55 COPE **Employer identification number** 91 - 2160086

2 Mailing address (P.O. box or number, street, and room or suite number)
980 Keynote Circle

City or town, state, and ZIP code
BrookLyn Hts., OH 44131

3 E-mail address of organization: CFARMER@PLUMBERS55.COM **4 Date organization was formed:** 05/01/1996

5a Name of custodian of records William P. Armstrong
5b Custodian's address 980 Keynote Circle
BrookLyn Hts., OH 44131

6a Name of contact person William P. Armstrong
6b Contact person's address 980 Keynote Circle
BrookLyn Hts., OH 44131

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
980 Keynote Circle

City or town, state, and ZIP code
BrookLyn Hts., OH 44131

8 Type of report (check only one box)

- | | |
|--|---|
| <input type="checkbox"/> First quarterly report
(due by April 15) | <input type="checkbox"/> Monthly report for the month of:
(due by the 20th day following the month shown above, except the
December report, which is due by January 31) |
| <input type="checkbox"/> Second quarterly report
(due by July 15) | <input type="checkbox"/> Pre-election report (due by the 12th or 15th day before the election) |
| <input type="checkbox"/> Third quarterly report
(due by October 15) | (1) Type of election: |
| <input type="checkbox"/> Year-end report
(due by January 31) | (2) Date of election: |
| <input checked="" type="checkbox"/> Mid-year report (Non-election
year only-due by July 31) | (3) For the state of: |
| | <input type="checkbox"/> Post-general election report (due by the 30th day after general election) |
| | (1) Date of election: |
| | (2) For the state of: |

9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 0

10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 6647

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

William Armstrong

07/22/2013

**Sign
Here**



Signature of authorized official



Date

Schedule A	Itemized Contributions	Schedule A
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Schedule B Itemized Expenditures

Schedule B

Recipient's name, mailing address and ZIP codeAggregate Non Disclosed Amounts
980 Keynote Circle
Brooklyn Hts, OH 44131 -**Name of recipient's employer**

N/A

Recipients's occupation

N/A

Amount of Expenditure

\$ 4547

Date of expenditure

06/30/2013

Purpose of expenditure

Various

Recipient's name, mailing address and ZIP codeCPA
615 Boardman Street
Sheffield, MA 01257 -**Name of recipient's employer**

N/A

Recipients's occupation

N/A

Amount of Expenditure

\$ 500

Date of expenditure

02/06/2013

Purpose of expenditure

Donation

Recipient's name, mailing address and ZIP codeFrank G. Jackson for a Better Cleveland
3029 Prospect Avenue
Cleveland, OH 44115 -**Name of recipient's employer**

N/A

Recipients's occupation

N/A

Amount of Expenditure

\$ 1000

Date of expenditure

06/06/2013

Purpose of expenditure

Donation

Recipient's name, mailing address and ZIP codeAufuldish for Commissioner
29814 Arthur
Wickliffe, OH 44092 -**Name of recipient's employer**

N/A

Recipients's occupation

N/A

Amount of Expenditure

\$ 600

Date of expenditure

05/09/2013

Purpose of expenditure

Donation